

Attorney's Docket
No 4925-212PUS

My residence, post office address and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TRANSMISSION METHOD FOR PACKET DATA AND A NETWORK ELEMENT

the specification of which (check only one item below)

[] was filed as United States application

ON

on _ (if applicable)

[x] was filed as PCT international application

Number PCT/FI01/00599

on 25 June 2001

and was amended under PCT Article 19

on _ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

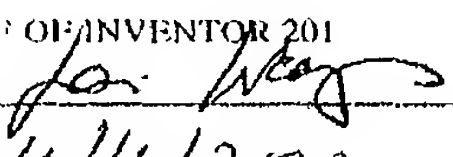
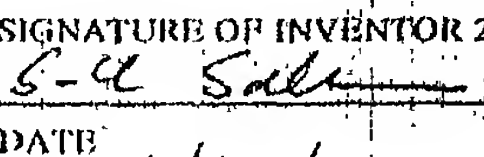
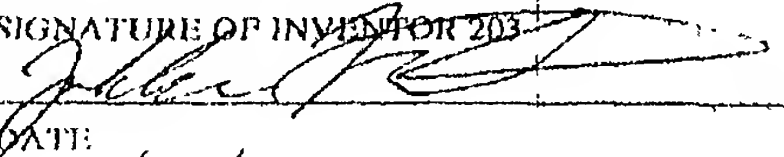
I acknowledge the duty to disclose information which is material to the patentability of the application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

[illegible]

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Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket No. 4925-212PUS
2	FULL NAME OF INVENTOR	FAMILY NAME VIRTANEN	FIRST GIVEN NAME Jukka	SECOND GIVEN NAME
0	RESIDENCE, CITIZENSHIP	CITY Lempäälä	STATE OR FOREIGN COUNTRY Finland FIN	COUNTRY OF CITIZENSHIP Finland
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS Keskuskatu 38 B 8	CITY Lempäälä	STATE & ZIP CODE/COUNTRY Fin-37550 Finland
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 
DATE 4/16/2002		DATE 4/16/2002		DATE 2/5/2002